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|--|---|---------------------------------------|--|---------------------------------|----------------------|
| REASON | | GRADE 0 RATING A | Inspection Date: | ESTABLISHMENT NAME: | |
| Regular | ✓ | | 9/26/2018 | TAN VICTORIA'S CHAMORU DAY CARE | |
| Follow-Up | | | Time In/Out: | OWNER/OPERATOR: | |
| Complaint | | | 4-15pm 4-35pm | IRIARTE, MARIE LYNN T. | |
| Investigation | | | Sanitary Permit No.: | LOCATION: 159 ETON LANE | Establishment Type: |
| Other: | | | 20000-180002580 | SINAJANA GUAM | FAMILY DAY CARE HOME |
| No. of Children: 3 Male 0 Female 3 Total | | | PERMIT STATUS: <input checked="" type="checkbox"/> Valid <input type="checkbox"/> Temporary <input type="checkbox"/> Expired | | |
| | | | Child Care License: No. 180180 / <input checked="" type="checkbox"/> Valid / <input type="checkbox"/> Provisional / <input type="checkbox"/> Expired | | |

The following items identify violations found this day in the operations and facilities which must be corrected by the next inspection or sooner as the Department indicates. Non-compliance may result in downgrading or permit suspension. To appeal a written request for hearing must be submitted before the indicated correction date.

I have read and understand the above violation(s) and I am aware of the corrective measures to be taken.

Received By (Name & Title):

DEH Inspector (Name & Title):

(2), (4), (6), (14), (21), (23), (24), (27), (28), (39) & (40).

J. GARCIA EPI-01

C. TAKASE Ep1401